

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10580, 74

FILING DATE

APPLICANT(S)

7-20-06 7-28-08 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1	
2				1		
3				1		
4				1		1
5				1		1
6				1		
7				1		
8				1		1
9				1		1
10				1		1
11				1		1
12			1		1	
13				1		1
14				2		
15				1		1
16			1		1	
17				1		1
18				1		1
19				3		3
20			1		1	
21				1		1
22				2		2
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50						
TOTAL IND.		↓	4	↓	4	↓
TOTAL DEP.		↓	3	↓	12	↓
TOTAL CLAIMS			35		20	

	★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						